Group Overview and Top Three Priorities
Official 2005 White House Conference on Aging Forum
Hosted by the North Carolina Governor's Advisory Council on Aging
Holiday Inn Brownstone Hotel, Raleigh
May 18, 2005, 9 am – 2 pm

Please complete the following summary page and the sheet identifying the group's overall top three priorities. You may send any supporting documentation. ***Return this information to Julie Bell, NC Division of Aging and Adult Services, 2101 Mail Service Center, Raleigh, NC 27699-2101 or to*** Julie.Bell@ncmail.net ***by*** **April 15, 2005.**

Name of the Organization:	Eastern Carolina Council Area Agency on Aging Albemarle Commission Area Agency on Aging Mid-East Commission Area Agency on Aging
Contact Information:	Tonya Cedars – 252.638.3185 – ext 3009 Susan Scurria – 252.426.5753 ext 232 Cynthia Davis – 252.974.1835
Date(s) of group session(s) being reported on:	April 20, 2005
Total number in attendance:	70
Number attending the group session(s) from each of the following categories (please check all that may apply):	Consumers: __x___ Family Caregivers: __x___ Providers: __x___ Professional Associations: _x____ Trade Associations:_____ Advocates:__x___ Government:_x____ LTC Facilities: __x____ Academia: __x___ Media: __x___ Baby Boomers: __x____ Other: _____
Any additional information of importance:	Voices from 24 eastern NC counties were heard at the forum. It should be noted that the issue – "Assure the solvency of Medicare" - was identified in equal status as the issue – "Assure affordable health care for people of all ages". In an effort to send only three priorities forward, a straw vote from the floor was taken between the two priorities to break the tie and produce only three priority issues from the forum. After the vote, the issue - Assure the solvency on Medicare - received a few more votes and hence became the third priority issue.

Top Three Priorities for Future National Aging Policy

Please list below your group's top three policy priorities and present other specifics (e.g., implementation strategies, ideas for financing) that would help identify realistic solutions to the problem or issue associated with each priority.

Policy Issue #1: Assure affordability of prescription drugs

Rationale:
- address income issues for seniors
- help cash flow of seniors
- income should not be a barrier to good health
- people will have better quality of life, greater independence longer
- human right to basic health care
- seniors are more compliant with low cost drugs
- its impact on the heath care system
- decrease dependency on emergency room visits, length of stay in hospital, and decrease office visits
- efficiency of health care system could be increased
- could reduce costs of health care if medications were affordable
- not force individuals into institutional care
- current prescription assistance programs can be cumbersome
- many seniors who are barely above eligibility levels do not qualify yet, when calculating their net income after subtracting their out-of-pocket costs for prescriptions, they become very low income

Comments/Implementation Strategies:

- Price controls
- Regulation of research and development costs
- Regulation of financial end of pharmaceutical industry
- Lessen the timeframe for drug patens
- Improve access to prescription assistance programs
- Reduce advertising costs passed on to consumers or ban TV advertisements on brand name drugs
- Ban private fees paid to FDA employees by drug companies
- Use government buying power to offer lower costs to seniors
– Mirror the Medicaid program for drugs
- Develop a standard formulary
- Make purchasing drugs from out of country a safe, effective option
- Increase promotion of disease prevention and health promotions
- More education regarding drug choices and uses
– Raise awareness in medical community
- Universal health coverage that will include affordable prescription drugs

Policy Issue #2: Strengthen availability of appropriate transportation options for elderly and disabled

Rationale:
- need to promote the highest level of independence – creates a sense of personal power
- seniors are unable to get to jobs, programs, services
- reduces need for early institutionalization
- elderly and disabled adults with access to transportation remain independent and socially active longer (productive citizens) resulting in less disease and mental health issues consequently
- more cost effective for society and health care
- less dependence on government and government funds
- self esteem increased
- promotes Senior Friendly Communities
- increase service area radius
- people need to access health care and community programs
- reduces isolation
- people unable to drive & often health declines
- especially a problem in rural areas where there is no public transportation

Comments/Implementation Strategies:

- Promote more age-friendly environments (sidewalks, roads) as a preventive measure
- Access to all community-based services will allow individuals to remain independent
- Promote or strengthen volunteer programs to assist
- Encourage volunteer drivers and reimburse for gas through faith community
- Strengthen support teams/volunteers who encourage carpools
– Provide tax credits for volunteers
- Develop incentives for private sector
- Increase funding
- Make modes of transportation more senior-friendly, accessible to elders
- Improve awareness of transportation options to seniors
- Expand public transportation
- Allow seniors in Pitt County to ride ECU buses
- Use school buses when not being used
- Revisit the Medicaid guidelines for transportation
- Explore new transportation options
- Advertise services that are available and how to access them
- Lower gas prices
- Coordinate local services, provide more flexible schedules, central office to set up daily scheduled for those who need rides
- Enhance public transportation
- Look at transportation as a continuum of service (different levels) to meet different abilities and levels of need
- Lottery
- Increase sin tax (tobacco, alcohol)
- Cost-share contributions
- "ROAP" Policy better defined to meet the needs of the Rural Operating Assist Program

Policy Issue # 3: Assure solvency of Medicare

Rationale:

- gives a common level of support across the U.S., we all have equal footing
- not meeting the needs of the elderly
- Medicare is the primary insurance for people over 65, we need to preserve it
- provides some security that health care needs will be met
- it is a basic human right
- increasing senior population
- allow it to continue because it works

Comments/Implementation Strategies:

- Everyone pays into the system
– Expand the pool of coverage
- Increase the annual earnings subject to tax
– Encourage personal savings and investment options in addition, not in place of Social Security
- Education and incentives for retirement savings
- Need to work on a better coordinated health and service system for all
- Reduce fraud (need to educate public to encourage them to read explanation of benefits and report errors and fraudulent practices)
- Call M.D. & question bill, sign and compare checkout sheet as you leave MD office
- Call 1-800# on explanation of benefits and report
- Follow-up with Utilization Team
- Increase training of personnel
- Reduce Congressional "perks"
- Focus on more wellness prevention
- Pay for fitness center membership
- Re-evaluate the health care system (cut other programs to ensure better health care)
- Use a percentage of lottery profits
- Use a percentage of tobacco & alcohol profits
- Raise retirement age
- Increase payroll taxes
- Allow investments
- Reduction of health care costs
- Medical liability lawsuits driving the cost of liability insurance
- Overhaul the entire healthcare system, re. affordability issues
- Reforming Social Security (eliminate the cap on Social Security payroll tax - make Social Security income based so that money is saved for Medicare)
- Continue on with its purpose and maintain political support

---

The completed form—**Top Three Priorities**—should be submitted by **April 15th** to Julie Bell at the Division: 2101 Mail Service Center, Raleigh, NC 27699-2101; fax: 919-733-0443; email: Julie.Bell@ncmail.net. If you have questions about this, contact her by email or phone: 919-733-8400.